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	PAT	ENT APPLIC		I FEE DETE Ite for Form PT		N RECORD		Applicat	ion or Docket Nu	ımber
		CLAIMS AS	FILED -	– PART I (Co	SMALL	SMALL ENTITY		OTHER THAN SMALL ENTITY		
	FOR	NUMBI	NUMBER FILED NUMBI		ER EXTRA	CTRA RATE F			RATE	FEE
	IC FEE CFR 1.16(a))						\$	OR		s
TOTAL CLAIMS (37 CFR 1.16(c))			minus 20 =					OR	x s=	
	EPENDENT CLAIN CFR 1.16(b))	vis .	minus 3 = *			x \$=		OR	x \$=	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))					+ \$=		OR	+ \$=		
* If the difference in column 1 is less than zero, enter "0" in column 2.					TOTAL		OR	TOTAL		
	C	LAUMS AS AM	ENDED	– PART II						
X	-150	Column 1)		(Column 2)	(Column 3)	SMALL	ENTITY	OR		R THAN ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ME	Total (37 CFR 1.16(c))	. 11	Minus	3 3	=	x s=		OR	x s=	
IEN	Independent (37 CFR 1.16(b))	•	Minus	3	=	x \$=		OR	× \$=	
AN	FIRST PRESENT	ATION OF MULTIPL	E DEPENDE	ENT CLAIM (37 CF	FR 1.16(d))	+ \$=		OR	+ \$=	
						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)			_		
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE	i	RATE	ADDI- TIONAL FEE
DME	Total (37 CFR 1.16(c))	•	Minus	**	= .	x \$=		OR	x \$=	
AMENDMENT	Independent (37 CFR 1.16(b))	•	Minus	***	=	x \$=		OR	× \$=	
AN	FIRST PRESENT	ATION OF MULTIPL	E DEPENDE	ENT CLAIM (37 CF	R 1.16(d))	+ \$ =		OR	+s =	
	****		_			TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)					
ENTC		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
DME	Total (37 CFR 1.16(c))	•	Minus	**	=	x s =		OR	× \$=	
AMENDMENT	Independent (37 CFR 1.16(b))	•	Minus	***	=	x \$=		OR	× \$=	
AN	FIRST PRESENT	ATION OF MULTIPL	E DEPENDE	ENT CLAIM (37 CF	R 1.16(d))	+s =		OR	+ s =	
						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
•	* If the "Highest I	olumn 1 is less tha Number Previously Number Previously	/ Paid For	IN THIS SPACE	is less than 20,	enter "20".		•		

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001 /// 0 5/ 735										
CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN (Cotumn 1) (Cotumn 2) TYPE OR SMALL ENTITY										
TOTAL CLAIMS	33		RAT	Œ	FEE		RATE	FEE		
FOR	NUMBER FILED	NUMBER EXTRA	BASIC	FEE	370.00	OR	BASIC FEE	740.00		
TOTAL CHARGEABLE CLAIMS	Aminus 20=	. 13	XS	9=	117	OR	X\$18=			
INDEPENDENT CLAIMS	minus 3 =	•	X4:	}=		OR	X84= ·			
MULTIPLE DEPENDENT CLAIM P	RESENT		+14	0=		OR	+280=			
* If the difference in column 1 is	less than zero, ente	TOT		487	OR	TOTAL				
CLAIMS AS A	MENDED - PAR	ITII				,	OTHER	THAN		
1-8.04 (Column 1)		mn 2) (Column 3	SM/	LL I	ENTITY	OR	SMALL			
CLAIMS REMAINING AFTER AMENDMENT	NUM PREVI	HEST ABER PRESENT HOUSLY EXTRA	RA	ſΈ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
AFTER AMENDMENT Total • 33 Independent •	Minus = 2	3 -0	X\$	9=		OR	X\$18=			
Independent *	Minus *** [3 -	X4:	<u>}-</u>		OR	X84=			
FIRST PRESENTATION OF M	IRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+280=			
•			JIAL	/	OR	TOTAL ADDIT, FEE				
1.2505 (Column 1)	(Colu	<u>ımn 2) (Column 3</u>	ADDIT.)	ree:		8	ADDIT. PEE			
CLAIMS REMAINING	HIGI NUM PREV	HEST MBER PRESENT 10USLY EXTRA	RA	ΓE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
Total • 33	Minus ** 3	33 • (X\$	9=		OR	X\$18=)		
AFTER AMENDMENT Total • 33 Independent • /	Minus •••	3 •	X4	2=		OR	X84=	X		
PIRST PRESENTATION OF M	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									
_			ADOIT	PEE	<u> </u>	OR	ADOIT. FEE			
3-1405 (Column 1)		ımn 2) (Column 3	<u> </u>			_				
CLAIMS REMAINING AFTER AMENOMENT Total Independent	NUI PREV	HEST MBER PRESENT NOUSLY EXTRA D FOR	RA	ΤE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
Total •33	Minus3	33 =/7	XS	9=		OR	X\$18=	/		
Independent •	Minus ***	3	X4	2=		OR	X84=	Y		
PINST PRESENTATION OF A	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									
* If the entry in column 1 is less than the entry in column 2, write "0" is column 3. **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE										
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.										